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Combined Declaration	For atent	Application a	and Pow	ver of Attorney			ATTO	NEYD	OCKET				
					•		809981	MW_					
My sidence, post office address and citizenship are as stated below next to my name,													
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:													
GRAPHICAL USER INTERFACE ADAPTED TO ALLOW SCENE CONTENT ANNOTATION OF GROUPS OF PICTURES IN A PICTURE DATABASE TO PROMOTE													
EFFICIENT DATABASE BROWSING													
The specification of which (check only one item below):													
X is attached hereto.													
was filed as United States Application Serial No. on and was amended on (if applicable).													
was amended on (if applicable). was filed as PCT international application Number on and was amended under PCT Article 19 on (if applicable).													
I hereby state that I have reviewed								y any a	mendment				
referred to above.	no to the IIO D t	ont & T-do	Mac -11 to	Commetica tasa 4-	na ta ba		tantakili4.	n deÆ-	d in mid-				
I acknowledge the duty to disclos 37, Code of Federal Regulations,		ent & Trademark O	office all in	ormation known to m	ne to be mate	naitopai	tentability a	s define	d in Title				
I hereby claim foreign priority be		•			.,.								
PCT international application(s) of foreign applications(s) for patent													
States of America filed by me on PRIOR FOREIGN/PCT APPLI						ich prio	rity is claim	ed:					
COUNTRY		PPLICATION NUMBER	CLAINS	DATE OF FILING		P	RIORITY CLAMED U	NDER 35 USC	§119				
(if PCT, indicate PCT)				(day morth year)			YES		NO				
						•	YES		NO				
							YES		ю				
I hereby claim the benefit under I	Fitle 35, United S	tates Code, 119 8(e	e) of any Ui	nited States provisions	al application	(s) liste	d below:		_				
PRIOR PROVISIONAL APPLI													
	PLICATION NUMBER		1		FILING DA	πĖ							
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I hereby claim the benefit under I the United States of America that													
prior applications(s) in the manne Office all information known to	er provided by th	e first paragraph of	f Title 35,	112, I acknowledge	the duty to d	isclose t	to the U.S. I	Patent &	Trademark				
between the filing date of the prior							91.50, WILL	200	70				
PRIOR US APPLICATIONS O	R PCT INTERN	IATIONAL APPLI	CATIONS	DESIGNATING TH	E U.S FOR	BENEF			0				
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PCT APPLICATIONS DESIGNATING THE U.S.													
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		laration For Patent Application			ATTORNEY DOCKET 80998DMW							
POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or												
agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute												
this application and transact all business in the Patent and Trademark Office connected												
therewith.												
B MAR 1 2 C												
Se	Send Correspondence to: Patent Legal Staff Direct Telephone Calls to: (name and telephone number)											
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		343 Sta		Company PADEMARK OFF	David M. Woods							
					(716) 477-5256							
		Rochest	e1, IN 1	14650-2201	FAX: (716) 477-4646							
2	FULL NAME OF INVENTOR	FAMILY NAME Prabhu		FIRST GIVEN NAME Prasad	SECOND GIVEN NAME V.							
	RESIDENCE &	CITY 1295 Fairway 7		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP							
Macedon				New York 14502 USA	India							
1	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company		343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA							
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٢	INVENTOR	Cowell	A4	Andrew STATE OR FOREIGN COUNTRY	J. COUNTRY OF CITIZENSHIP							
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		Orlando										
2	BUSINESS ADDRESS	BUSINESS ADDRESS		343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA							
\dashv	Eastman Kodak Company Fill NAME OF FAMILY NAME			FIRST GIVEN NAME	SECOND GIVEN NAME							
0	INVENTOR RESIDENCE &	CITY	-	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP							
3	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP CODE (COUNTRY)							
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME							
ٔ	RESIDENCE &	E& CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP							
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•	RESIDENCE &	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP							
5	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP CODE (COUNTRY)							
2	FULL NAME OF INVENTOR	OF FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME							
0 RESIDENCE & CITY CITZENSHIP				STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP							
6	6 BUSINESS ADDRESS ADDRESS			CITY	STATE & ZIP CODE (COUNTRY)							
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.												
SIGNATURE OF INVENTOR 201 SIGNATURE OF INVENTOR 202 SIGNATURE OF INVENTOR 203												
Whatim Office												
DATE DATE												
	02-02-2001 02-07-2001											

SIGNATURE OF INVENTOR 204

DATE

SIGNATURE OF INVENTOR 205

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SIGNATURE OF INVENTOR 206

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